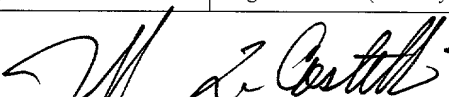


UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for nonprovisional applications under 37 CFR 1.53(b))</i>		Attorney Docket No. 740709-489	
		First Inventor Kazumasa OHNISHI	
		Title PRECISION POSITIONING UNIT AND LINEAR MOVEMENT CONTROL UNIT	
		Express Mail Label No.	
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents		ADDRESS TO: Commissioner for Patents Box Patent Application Washington, DC 20231	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages 10] <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications <i>(if applicable)</i> - Statement Regarding Fed sponsored R & D <i>(if applicable)</i> - Reference to sequence listing, a table, or a computer program listing appendix <i>(if applicable)</i> - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Figs 1-8 [Total Sheets 6] Oath or Declaration [Total Pages 1] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b) <input checked="" type="checkbox"/> Application Data Sheet See 37 CFR 1.76		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8 Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a <input type="checkbox"/> Computer Readable Form (CRF) b Specification Sequence Listing on 1. <input type="checkbox"/> CD-ROM or CD-R (2 copies, or 11 <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies	
ACCOMPANYING APPLICATION PARTS			
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10 <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> 11 <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 12 <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15 <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16 <input type="checkbox"/> Nonpublication request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other.			
If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, on an Application Data Sheet under 37 CFR 1.76. <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No. _____ Prior application information Examiner _____ Group / Art Unit _____ For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
19. CORRESPONDENCE ADDRESS			
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		22204 or <input type="checkbox"/> Correspondence address below	
Name	Jeffrey L. Costellia		
Address	Nixon Peabody LLP		
City	McLean	State	Virginia
Country		Telephone	(703) 790-9110
		Zip Code	22102
		Fax	(703) 883-0370
Name (Print/Type)	Jeffrey L. Costellia	Registration No. (Attorney/Agent)	#35,483
Signature			Date 12/7/01

JC986 U.S. PTO

10/004807

12/07/01

FEE TRANSMITTAL FOR FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) 370.00

Complete if Known

Application Number	Not Yet Assigned
Filing Date	December 7, 2001
First Named Inventor	Kazumasa OHNISHI
Examiner Name	Not Yet Assigned
Group Art Unit	Not Yet Assigned
Attorney Docket No.	740709-489

METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to

Deposit
Account
Number

19-2380 (74709-489)

Deposit
Account
Name

Nixon Peabody LLP

- ☒ Charge Any Additional Fee Required
Under 37 CFR 1.16 and 1.17
- ☒ Applicant claims small entity status
See 37 CFR 1.27

2. ☒ Payment Enclosed:
- ☒ Check ☐ Credit Card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
01	740	201	370	Utility filing fee	370.00
06	330	206	165	Design filing fee	
07	510	207	255	Plant filing fee	
08	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

SUBTOTAL (1) (\$) 370.00

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
19	-20** = 0	X	
Independent Claims	2	-3** = 0	X
Multiple Dependent			

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) -----

**or number previously paid. if greater, For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English transaction	
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	200	200	Extension for reply within second month	
117	920	460	460	Extension for reply within third month	
118	1,440	720	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.29(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify) _____

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

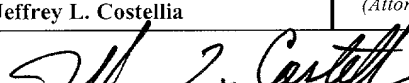
CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, Washington, DC 20231. on

Name _____

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Jeffrey L. Costellia	Registration No (Attorney/Agent)	#35,483	Telephone	(703) 790-9110
Signature		Date	12/7/01		